

Abstract 429

TITLE: Building CBO Capacity for Evaluating Behavior Change: Lessons from the Field

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ISSUE: There has been an interest in building the capacity of CBOs to understand and incorporate the theory and the practice of behavior change into the design, monitoring, and evaluation of HIV prevention education programs. The State of Connecticut's Department of Public Health in conjunction with the Community Planning Group launched the Connecticut HIV Evaluation Bank, a training and technical assistance project designed to (1) increase the capacity of CBOs to design theory-based and outcomes-driven prevention education programs and (2) provide ongoing, site-based technical assistance in data management, survey design, and information dissemination. Three years of effort reveal lessons about the opportunities and the challenges of building a behavioral science perspective into HIV prevention education programs that target injection drug users, heterosexual Latinas and African Americans, and youth.

SETTING: The Connecticut HIV Evaluation Bank is intended for 50 statewide contractors operating HERR prevention education programs who serve Latinos(as) and African-American injection drug users, youth, heterosexual women at risk, and gay, lesbian, and transgender individuals throughout the state.

PROJECT: The HIV Evaluation Bank (1) conducts Evaluation 101 and 202 training for project coordinators and educators contracted under HERR. A cadre of behavioral scientists provide (2) site-based technical assistance in theory-based, outcomes-driven program design, (3) data management and analysis, and (4) design and implementation and outcome/impact evaluation protocol that includes assistance with survey design, data analysis, and information dissemination.

RESULTS: The HIV Evaluation Bank has trained several hundred educators and administrators of CBOs on evaluation methodology. It has conducted two implementation evaluations and designed outcomes evaluation protocols in four CBOs. In addition, the HIV Evaluation Bank has designed data management tools through Excel and Access in Windows.

LESSONS LEARNED: (1) There is strong interest on the part of CBOs to incorporate behavioral science into the work they do in neighborhoods. In addition, (2) most CBOs have the resources available to collect and manage data. However, there is also clear evidence that the challenges of implementing theory-based, outcomes-driven programs include: (3) limited skills capacity; (4) serious time constraints exacerbated by the high caseloads of front-line workers; and (5) difficulty in acquiring funds to implement evaluation efforts. Finally, a commitment to enhance the capacity of CBOs to understand and incorporate behavioral science into education and outreach efforts in HIV prevention requires (6) a commitment to long-term training and technical assistance for CBOs.

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